

Tulane University Surgeon Pioneers "Scarless" Thyroid Surgery

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Tulane University School of Medicine surgeon Dr. Emad Kandil is one of the first in the country to perform a new form of endoscopic surgery that uses a small incision under the arm to remove all or a portion of the thyroid or parathyroid glands without leaving a scar on the neck.

The technique, which was approved by the U.S. Food and Drug Administration this summer, uses the latest Da Vinci® three-dimensional, high-definition robotic equipment to make a two-inch incision below the armpit that allows doctors to maneuver a small camera and specially designed instruments between muscles to access the thyroid. The diseased tissue is removed endoscopically through the armpit incision.

“This is an exciting new treatment option for certain patients who need thyroid surgery but are concerned about having a visible and permanent neck scar,” says Kandil, who is chief of the Endocrine Surgery Section, assistant professor of surgery and adjunct assistant professor of otolaryngology at Tulane. “This technique safely removes the thyroid without leaving so much as a scratch on the neck.”

Traditional thyroidectomies can involve a long incision at the base of the neck.

Kandil is performing the “scarless” thyroidectomy surgery at Tulane Medical Center and is one of only a few surgeons in the United States trained in the technique. In fact, he chairs an annual symposium at Tulane to teach surgeons how to perform minimally invasive thyroid surgery and will be teaching the technique to doctors from across the country.

The new technique has benefits that go beyond aesthetics. Unlike other forms of endoscopic thyroid surgery, it doesn't require blowing gas into the neck to create

space to perform the operation. Those techniques can risk complications if the gas is retained in the neck or chest after surgery, causing significant discomfort and postoperative complications. Because the robotic camera provides three-dimensional viewing with image magnification up to 10 times normal, the surgery is very precise so there is a reduced likelihood of laryngeal nerve damage and less risk of trauma to the parathyroid glands, which are near the thyroid. Kandil says patients have reported less discomfort and faster recovery times after the new procedure.

Robotic transaxillary thyroid surgery was originally developed in South Korea by Dr. Woong Chaung, associate professor of surgery at Yonsei University College of Medicine in Seoul.

The thyroid is a hormone-producing gland that regulates the body's metabolism and affects critical body functions, such as energy level and heart rate. Thyroid surgery is frequently used to treat thyroid cancer and is sometimes the preferred approach to dealing with goiter, nodules or an overactive thyroid. An estimated 20 million Americans have some form of thyroid disease and women are five to eight times more likely than men to have thyroid problems, according to the American Thyroid Association.

For more information about the surgery or to schedule an appointment, patients can call the Department of Surgery at Tulane University School of Medicine at (504) 988-3589 or Tulane Medical Center at (504) 988-5800.